## DECT AVAILABLE CODY

PATENT APPLICATION FEE DE	TERMINATION RECORD
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Effective October 1, 2000

.	Application or Docket Number
	00/ 10/1/0
	19/152642

CLAIMS AS FILED - PART I (Column 1)				(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		69				ſ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBI	NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS 69 minus 20=				.49	X\$ 9= 441			441	OR	X\$18=		
INDI	NDEPENDENT CLAIMS 9 minus 3 =				. 6			X40=	240	OR	X80=	•
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						ı	TOTAL	1036	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)						(Column 3)		SMALL		OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	REST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	· 25	Minus		,9	= \		X\$ 9=		OR	X\$18=	
MEN	Independent	• 3	Minus	••• (	3	=	lt	X40=	1.	OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)								10011.1 221		_		
NT B		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 24	Minus	• 2	5	=		X\$ 9=		OR	X\$18=	
	Independent	. 3	Minus	] ••• 3		- \	H	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		,	+135=		OR	+270=	
							1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	umn 2)	(Column 3)		ADUII. FEE		•	A9011.1 CC	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
OM O	Total	. 21	Minus	(	24	= \		X\$ 9=		OR	X\$18=	
	Independent	.3'	Minus	•••	3	= \		X40=		OR	X80=	
Ľ	FIRST PRES	ENTATION OF N	AULTIPLE D	EPENDE	NT CLAIM		J	+135=		OR	+270=	
	If the entry in col	umn t is less than	the entry in o	olumn 2, wi	rite "O" in o	olumn 3.	۱ .	TOTAL		OR	TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is I so than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (T tal or Independent) is the highest number tound in the appropriate box in column 1.												